Eill i	n this information to identif	A VOIR C359.			
Debt	First Name	ette Moye-Daniels Middle Name	Last Name		
Debt (Spous	or 2 se if, filing) First Name	Middle Name	Last Name		
Unite	ed States Bankruptcy Court fo	r the: SOUTHERN DISTRICT	OF MISSISSIPPI		
Case	e number				
(if know				_	c if this is an ded filing
Offi	icial Form 106Su	<u>m</u>			
Sun	nmary of Your Ass	ets and Liabilities ar	nd Certain Statistical Information		12/15
inforr	nation. Fill out all of your so	hedules first; then complete th	e are filing together, both are equally responsible f ne information on this form. If you are filing ameno k the box at the top of this page.		
Part	1: Summarize Your Asse	ts			
				Your a	ssets If what you own
1.	Schedule A/B: Property (Of	ficial Form 106A/B)		\$	0.00
				\$	115,446.00
	1c. Copy line 63, Total of all p	property on Schedule A/B		\$	115,446.00
Part :	2: Summarize Your Liabi	lities			
					abilities t you owe
		dave Claims Secured by Property n Column A, <i>Amount of claim,</i> at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	120,350.00
		h Have Unsecured Claims (Officia m Part 1 (priority unsecured claim	Il Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from	m Part 2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	62,378.77
			Your total liabilities	\$ \$	182,728.77
					_
Part	3: Summarize Your Incor	ne and Expenses			
	Schedule I: Your Income (Off Copy your combined monthly	,	j l	\$	5,427.38
	Schedule J: Your Expenses (Copy your monthly expenses			\$	2,697.00
Part -	4: Answer These Question	ons for Administrative and Stat	istical Records		
		cy under Chapters 7, 11, or 13? report on this part of the form. C	heck this box and submit this form to the court with yo	our other sc	nedules.
7.	■ Yes What kind of debt do you h	ave?			
			debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not print the court with your other		ve nothing to report on this part of the form. Check thi	s box and s	ubmit this form to

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Debtor 1 Sonya Lynette Moye-Daniels Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,557.38

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this inform	nation to identify your	case and this fil	ing:				
Debtor 1	Sonya Lynette M	ove-Daniels					
	First Name	Middle Name	e L	ast Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name		ast Name			
, , , , , , , , , , , , , , , , , , ,	nkruptcy Court for the:						
Officed States Bar	ikruptcy Court for the.	300 TILKN DI	311101 01 11110010				
Case number						_	theck if this is an mended filing
						a	mended ming
Official For	100 A /D						
Official For		4					
	e A/B: Prop						2/15
think it fits best. Be	e as complete and accura e space is needed, attach	ate as possible. If t	wo married people ar	e filing together, both ar	ne category, list the asse re equally responsible for es, write your name and o	r supplying	correct
Part 1: Describe	Each Residence, Building	g, Land, or Other R	eal Estate You Own	or Have an Interest In			
1. Do you own or h	ave any legal or equitabl	e interest in any re	sidence, building, la	nd, or similar property?			
■ No. Go to Part	0						
Yes. Where is							
Tes. Where is	the property:						
Dart 2: Decaribe	/a.v. Vahialaa						
Part 2: Describe	Your Vehicles						
3. Cars, vans, tru □ No ■ Yes	icks, tractors, sport u	tility vehicles, m	otorcycles				
3.1 Make: N	lissan	Who ha	s an interest in the p	roperty? Check one	Do not deduct secure		
_	Sentra		tor 1 only	repersy: emock emo	the amount of any sec Creditors Who Have		
Year: 2	2024		tor 2 only		Current value of the	Curre	ent value of the
Approximate			tor 1 and Debtor 2 only		entire property?	portio	on you own?
Other inform	iation.	At le	ast one of the debtors	and another			
			ck if this is communi	ty property	\$19,838.0	<u> </u>	\$19,838.00
		(see	instructions)				
Examples: Boat No Yes Add the dollar pages you have	craft, motor homes, A s, trailers, motors, pers r value of the portion ve attached for Part 2	onal watercraft, fi you own for all o . Write that numb	shing vessels, snow	mobiles, motorcycle ac	ccessories / entries for		\$19,838.00
	ave any legal or equit		ny of the following	g items?			t value of the
						•	you own? deduct secured

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

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D	ebtor 1	Sonya Lyne	tte Moye-Daniels Case number (if known)
6.	Exampl	old goods and fles: Major appliar	furnishings nces, furniture, linens, china, kitchenware	
	□ No	Describe		
	— 165.	Describe		
			Household Goods	\$825.00
7.	□No	<i>les:</i> Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; I phones, cameras, media players, games	music collections; electronic devices
			Electronics	\$900.00
9.	■ No □ Yes. Equipm Exampl ■ No □ Yes. Firearr Exampl ■ No □ Yes. Clothe Exampl □ No	other collecti Describe ent for sports a les: Sports, photo musical instri Describe ms oles: Pistols, rifle: Describe ples: Everyday cl	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	
	■ Yes.	Describe		
			Clothing	\$700.00
12	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches Jewelry	, gems, gold, silver
13	Examp ■ No	arm animals ples: Dogs, cats, Describe	birds, horses	
14	■ No	ther personal an	nd household items you did not already list, including any health aids you did no	ot list
	— 165.	Oive specific IIII	Official Office	
1		the dollar value	of all of your entries from Part 3, including any entries for pages you have attac	shed \$2,725.00

Del	otor 1	Sonya Lynette Moye-Daniels		Case number	(if known)	
Par	4: Des	scribe Your Financial Assets				
		rn or have any legal or equitable interest in a	any of the following?			Current value of the portion you own? Do not deduct secured claims or exemptions.
[□ No ·	oles: Money you have in your wallet, in your hon	•	d when you file y	our petition	
	- 103			Cash		\$500.00
	Examp _	its of money bles: Checking, savings, or other financial accounts with the institutions. If you have multiple accounts with the institutions of the institutions.		credit unions, br	okerage hou	ses, and other similar
_	□ No ■ Yes		Institution name:			
		17.1. Checking	Wells Fargo			\$4.00
		17.2. Checking	Cadence			\$1,200.00
		17.3.	CashApp			\$0.00
_	Examp	, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with brok	cerage firms, money market accounts	3		
_	■ No □ Yes	Institution or issuer na	ame:			
_	Non-pu joint vo ⊒ No	ublicly traded stock and interests in incorporenture	rated and unincorporated business	ses, including a	n interest in	an LLC, partnership, and
ı	Yes.	Give specific information about themName of entity:		% of ownersh	nip:	
		SLM Logistics, LLC		100	%	Unknown
ļ	Negotia Non-ne ■ No	nment and corporate bonds and other negotiable instruments include personal checks, cash egotiable instruments are those you cannot tran	iers' checks, promissory notes, and r	money orders.		
04	Datinan	Issuer name:				
ı	Examp ■ No	nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 40	3(b), thrift savings accounts, or other	pension or profi	t-sharing pla	ns
[⅃ Yes.	List each account separately. Type of account:	Institution name:			
_	Your sl Examp	ey deposits and prepayments hare of all unused deposits you have made so t loles: Agreements with landlords, prepaid rent, p				, or others
	■ No □ Yes.		Institution name or individual:			

D	BOLOT I Sonya Lyne	tte Moye-Danieis		ase number (if known)	
23.	_ `	or a periodic payment of money to	you, either for life or for a number of	/ears)	
	■ No □ Yes Is	suer name and description.			
24.	Interests in an education 26 U.S.C. §§ 530(b)(1),		ied ABLE program, or under a qua	ified state tuition program.	
	■ No □ Yes In	stitution name and description. Se	eparately file the records of any intere	sts.11 U.S.C. § 521(c):	
25.	_ ` '	ture interests in property (other	than anything listed in line 1), and	rights or powers exercisal	le for your benefit
	■ No□ Yes. Give specific inf	ormation about them			
26.	Examples: Internet don No		ther intellectual property om royalties and licensing agreemen	s	
27	Yes. Give specific inf				
21.		and other general intangibles mits, exclusive licenses, cooperat	ive association holdings, liquor licens	es, professional licenses	
	☐ Yes. Give specific inf	ormation about them			
M	oney or property owed	o you?		ķ C	Current value of the cortion you own? On not deduct secured claims or exemptions.
28.	Tax refunds owed to y ☐ No ■ Yes. Give specific info		ether you already filed the returns and	d the tax years	
		State Tax Re	fund		\$5,000.00
		Federal Tax	Refund		\$5,000.00
				1	
		EIC			\$5,000.00
29.	Family support Examples: Past due or ■ No □ Yes. Give specific info		ort, child support, maintenance, divord	e settlement, property settler	ment
30.		es, disability insurance payments, paid loans you made to someone	disability benefits, sick pay, vacation else	pay, workers' compensatior	ı, Social Security
31.	Interests in insurance Examples: Health, disa	policies	ings account (HSA); credit, homeown	er's, or renter's insurance	
	■ No □ Yes. Name the insura	nce company of each policy and I Company name:	ist its value. Beneficiar	<i>y</i> :	Surrender or refund value:
					-

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Debtor 1	Sonya Lynette Moye-Daniels Case number (if known)	
If you some	nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receivene has died.	ive property because
☐ Yes	s. Give specific information	
Exar ■ No	as against third parties, whether or not you have filed a lawsuit or made a demand for payment apples: Accidents, employment disputes, insurance claims, or rights to sue	
	b. Describe each claim	ant off plaims
34. Othe ■ No	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to	set on claims
☐ Yes	s. Describe each claim	
-	inancial assets you did not already list	
■ No □ Yes	s. Give specific information	
	the dollar value of all of your entries from Part 4, including any entries for pages you have attached	\$16,704.00
Part 5:	escribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do yo o	own or have any legal or equitable interest in any business-related property? So to Part 6.	
■ Yes.	Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Acco	unts receivable or commissions you already earned	
■ No □ Yes	s. Describe	
<i>Exai</i> □ No	e equipment, furnishings, and supplies nples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, bescribe	chairs, electronic devices
	Computer	\$500.00
	Copy Machine	\$200.00
40. Mac h	inery, fixtures, equipment, supplies you use in business, and tools of your trade	
■ Yes	s. Describe	
	2018 International LT625	\$31,479.00
	2016 International 4300. 209,111 miles	\$31,500.00
		, , , ,

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Debtor 1	Sonya Lynette Moye-Daniels	Case number (if known)	
	2007 Wilson Hopper Trailer		\$12,000.00
	Tools		\$350.00
	Supplies		\$150.00
41. Inventor ■ No □ Yes. [Describe		
42. Interests ■ No	s in partnerships or joint ventures		
☐ Yes. (Give specific information about them Name of entity:	% of ownership:	
43. Custom ■ No.	er lists, mailing lists, or other compilations		
☐ Do your	lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A	A))?	
	No Yes. Describe		
44. Any bus ■ No	siness-related property you did not already list		
☐ Yes. G	Sive specific information		
	ne dollar value of all of your entries from Part 5, including any entries fort 5. Write that number here		\$76,179.00
	cribe Any Farm- and Commercial Fishing-Related Property You Own or Have an In u own or have an interest in farmland, list it in Part 1.	nterest In.	
	own or have any legal or equitable interest in any farm- or commercial f	fishing-related property?	
	Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	ve	
Example	have other property of any kind you did not already list? es: Season tickets, country club membership		
■ No □ Yes. G	Sive specific information		
54 Add th	e dollar value of all of your entries from Part 7. Write that number here		\$0.00

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Debtor 1	Sonya Lynette Moye-Daniels	Case number (if known)		
Part 8:	List the Totals of Each Part of this Form			
55. Par	rt 1: Total real estate, line 2			\$0.00
56. Par	rt 2: Total vehicles, line 5	\$19,838.00		
57. Par	rt 3: Total personal and household items, line 15	\$2,725.00		
58. Par	rt 4: Total financial assets, line 36	\$16,704.00		
59. Par	rt 5: Total business-related property, line 45	\$76,179.00		
60. Par	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Par	rt 7: Total other property not listed, line 54 +	\$0.00		
62. Tot	tal personal property. Add lines 56 through 61	\$115,446.00	Copy personal property total	\$115,446.00
63. Tot	tal of all property on Schedule A/B. Add line 55 + line 62			\$115,446.00

Fil	I in this inform	ation to identify your cas	e:						
De	ebtor 1	Sonya Lynette Moye	-Daniels						
_	.h. (0	First Name	Middle Name	L	ast Name				
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name				
Ur	nited States Ban	kruptcy Court for the: S	OUTHERN DISTRICT OF I	MISS	ISSIPPI				
	ase number					☐ Check if this is an			
						amended filing			
\bigcirc	fficial Ear	m 106C							
	fficial For				_				
<u>S</u>	chedule	C: The Prop	erty You Cla	<u>im</u>	as Exempt	4/25			
the nee cas For spe	property you liseded, fill out and se number (if known each item of pecific dollar am	ted on Schedule A/B: Propattach to this page as manown). property you claim as executed a	erty (Official Form 106A/B) ny copies of Part 2: Addition mpt, you must specify the ively, you may claim the fo	as yo nal Pa e amo ull fai	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. ir market value of the property be	One way of doing so is to state a sing exempted up to the amount of			
fun exe	ds—may be un emption to a pa	ilimited in dollar amount.	However, if you claim an	exen	nption of 100% of fair market valu	penefits, and tax-exempt retirement ue under a law that limits the t, your exemption would be limited			
Pa	rt 1: Identify	the Property You Claim	as Exempt						
1.	Which set of	exemptions are you clain	ning? Check one only, ever	n if yo	our spouse is filing with you.				
	You are cla	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	_	3			3(-)(-)				
_	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.								
۷.			•	•		On a siting laws that allow assessed as			
		n of the property and line or hat lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption			
	2024 Nissan	Sentra 10000 miles		■ \$0.00		Miss. Code Ann. § 85-3-1(a)			
	Line from Sche	edule A/B: 3.1	\$19,838.00	_	<u> </u>	• • • • • • • • • • • • • • • • • • • •			
					100% of fair market value, up to any applicable statutory limit				
	Household (\$825.00		\$825.00	Miss. Code Ann. § 85-3-1(a)			
					100% of fair market value, up to any applicable statutory limit				
	Electronics Line from Sche	adula A/R: 7 1	\$900.00		\$900.00	Miss. Code Ann. § 85-3-1(a)			
	Line nom Sche	edule A/D. TTT			100% of fair market value, up to any applicable statutory limit				
	Clothing	antida A/D: 44.4	\$700.00		\$700.00	Miss. Code Ann. § 85-3-1(a)			
	Line from Schedule A/B: 11.1 –				100% of fair market value, up to any applicable statutory limit				
	Cash		\$500.00		\$500.00	Miss. Code Ann. § 85-3-1(a)			
	Line from Sche	edule A/B: 16.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Deb	otor 1 Sonya Lynette Moye-Daniels			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	State Tax Refund Line from Schedule A/B: 28.1	\$5,000.00	•	\$5,000.00	Miss. Code Ann. § 85-3-1(k)	
	Line Irom Schedule AVD. 20.1			100% of fair market value, up to any applicable statutory limit		
	Federal Tax Refund Line from Schedule A/B: 28.2	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(j)	
	Line from Schedule Av.B. 20.2			100% of fair market value, up to any applicable statutory limit		
	EIC Line from Schedule A/B: 28.3	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(i)	
	Line from Schedule A/B: 20.3			100% of fair market value, up to any applicable statutory limit		
	Computer Line from Schedule A/B: 39.1	\$500.00		\$500.00	Miss. Code Ann. § 85-3-1(a)	
	Line Irom Schedule A/B. 39.1			100% of fair market value, up to any applicable statutory limit		
	Copy Machine Line from Schedule A/B: 39.2	\$200.00		\$200.00	Miss. Code Ann. § 85-3-1(a)	
	Line from Schedule Av.D. 33.2			100% of fair market value, up to any applicable statutory limit		
	Tools Line from Schedule A/B: 40.4	\$350.00		\$350.00	Miss. Code Ann. § 85-3-1(a)	
	Line Irom Schedule A/B. 40.4			100% of fair market value, up to any applicable statutory limit		
	Supplies Line from Schedule A/B: 40.5	\$150.00		\$150.00	Miss. Code Ann. § 85-3-1(a)	
	Ellie Irolli Goricdale Av.B. 4010			100% of fair market value, up to any applicable statutory limit		
	Are you claiming a homestead exemption (Subject to adjustment on 4/01/28 and every			led on or after the date of adjustmer	nt.)	
	■ No					
	Yes. Did you acquire the property cover No	red by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ Voc					

Fill in this informa	ation to identify you	r case:				
Debtor 1	Sonya Lynette I		st Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Las	st Name		-	
United States Bank	kruptcy Court for the:	SOUTHERN DISTRICT OF MISSIS	SIPPI		_	
Case number					_	if this is an ded filing
Official Form Schedule [Who Have Claims Se	curec	l by Propert	у	12/15
		If two married people are filing together, bout, number the entries, and attach it to thi				
I. Do any creditors h	ave claims secured by	your property?				
☐ No. Check t	his box and submit the	nis form to the court with your other sche	edules. Yo	ou have nothing else	to report on this form.	
Yes. Fill in a	all of the information	below.				
Part 1: List All						
•				Column A	Column B	Column C
for each claim. If mor	re than one creditor has	nore than one secured claim, list the creditor a particular claim, list the other creditors in P cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Century Fir	rst	Describe the property that secures the c	aim:	\$41,420.00	\$31,500.00	\$9,920.00
Creditor's Name		2016 International 4300. 209,111 miles				
3318 Hardy Hattiesburg	Street g, MS 39401	As of the date you file, the claim is: Check apply. Contingent	all that			
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
Who owes the deb	t? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mortg	gage or sec	ured		
Debtor 2 only		car loan)	_			
☐ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, mechani	c's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this clai community deb		Other (including a right to offset)				
	Opened 9/07/23 Last Active					

Date debt was incurred 2/21/25

2023

Last 4 digits of account number

Debtor 1 Sonya Lynette Moye-Da	aniels	Case number (if known)		
First Name Middle I	Name Last Name			
2.2 Century First	Describe the property that secures the claim:	\$21,303.00	\$19,838.00	\$1,465.00
Creditor's Name	2024 Nissan Sentra 10000 miles			<u> </u>
	As of the date you file, the claim is: Check all that			
3318 Hardy Street	apply.			
Hattiesburg, MS 39401	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as mortgage or s	popurad		
Debtor 1 only	car loan)	secured		
Debtor 2 only				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another Check if this claim relates to a	Judgment lien from a lawsuit			
community debt	Other (including a right to offset)			
Onemad				
Opened 10/18/24				
Last Active				
Date debt was incurred 03/25	Last 4 digits of account number 2024	ļ		
				
2.3 Conn's HomePlus	Describe the property that secures the claim:	\$1,552.00	\$500.00	\$1,052.00
Creditor's Name	PMSI TV			
40400 111 1 454	As of the date you file, the claim is: Check all that			
10130 Highway 151 San Antonio, TX 78251	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as mortgage or s	popurad		
Debtor 1 only	car loan)	secureu		
Debtor 2 only				
Debtor 1 and Debtor 2 only At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)			
_	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened				
06/23 Last	0420	•		
Date debt was incurred Active 02/25	Last 4 digits of account number 0130	<u> </u>		

Debtor 1 Sonya Lynette Moye	e-Daniels	Case number (if known)		
First Name Mi	ddle Name Last Name			
2.4 Fergus Fcu	Describe the property that secures the claim:	\$24,031.00	\$31,479.00	\$0.00
Creditor's Name	2018 International LT625			
1026 E Broad St Monticello, MS 39654 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lier			
At least one of the debtors and another		1)		
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 5/13/24 Last Act Date debt was incurred 2/27/25	ive Last 4 digits of account number 000	01		
2.5 Fergus Fcu	Describe the property that secures the claim:	\$14,117.00	\$12,000.00	\$2,117.00
Creditor's Name	2007 Wilson Hopper Trailer			
1026 E Broad St Monticello, MS 39654 Number, Street, City, State & Zip Code Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage of			
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anot ☐ Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lier ther ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	n)		
Opened 5/20/24 Last Act 2/27/25	ive Last 4 digits of account number 000	02		

Debtor 1 Sonya Lynette Moye-Da	ette Moye-Daniels Case number (if known)			
First Name Middle N	ame Last Name	_		
2.6 First Metropolitan	Describe the property that secures the claim:	\$6,664.00	\$200.00	\$6,464.00
Creditor's Name	Household Goods			•
Attn: Bankruptcy				
6295 Summer Ave	As of the date you file, the claim is: Check all that	_		
Ste 102	apply.			
Memphis, TN 38134	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred Active 12/24 2.7 Regional Finance	Last 4 digits of account number 720 Describe the property that secures the claim:	\$3,243.00	\$200.00	\$3,043.00
Creditor's Name	Household Goods	\$3,243.00	ΨΖΟΟ.ΟΟ	ψ3,043.00
oroano. o manie	Household Goods			
979 Batesville Rd	As of the date you file, the claim is: Check all that apply.			
Greer, SC 29651	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Opened 07/24 Last				
Date debt was incurred Active 02/25	Last 4 digits of account number 782	3		

Debtor 1 Sonya Lyr	nette Moye-Da	aniels Cas	e number (if known)		
First Name	Middle N	lame Last Name			
2.8 Republic Fina	nce Llc	Describe the property that secures the claim:	\$6,537.00	\$200.00	\$6,337.00
Creditor's Name		Household Goods			¥ = / = = = =
Attn: Bankrun	tov				
Attn: Bankrup 7031commerc		As of the date you file, the claim is: Check all that			
		apply.			
Baton Rouge,		☐ Contingent			
Number, Street, City, S	State & Zip Code	Unliquidated			
Who owes the debt? C	Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or secure	ed		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the deb	otors and another	☐ Judgment lien from a lawsuit			
Check if this claim recommunity debt	elates to a	Other (including a right to offset)			
	Opened				
	07/24 Last				
Date debt was incurred	Active 12/24	Last 4 digits of account number 3029			
2.9 World Finance	Corn	Describe the property that secures the claim:	\$1,483.00	\$200.00	\$1,283.00
Creditor's Name	COIP	Household Goods	ψ1,403.00	φ200.00	φ1,203.00
		Household Goods			
Attn: Bankrup	tcy	As of the date you file, the claim is: Check all that			
Po Box 6429		apply.			
Greenville, SC	29606	Contingent			
Number, Street, City, S	State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or secure car loan)	ed		
Debtor 2 only		—			
Debtor 1 and Debtor 2	,	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the deb		☐ Judgment lien from a lawsuit			
Check if this claim re community debt	elates to a	Other (including a right to offset)			
	Opened				
	9/30/24				
But the section of	Last Active	Last 4 digits of account number 0401			
Date debt was incurred	12/31/24	Last 4 digits of account number 0401			
		Column A on this page. Write that number here:	\$120,350.00		
If this is the last page	of your form, add	the dollar value totals from all pages.	\$120,350.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:				
Debtor 1 Sonya Lynette Moye-Danie	els			
	le Name	Last Name		
Debtor 2 (Spouse if, filing) First Name Middle	le Name	Last Name		
United States Bankruptcy Court for the: SOUTHE	RN DISTRICT OF	MISSISSIPPI		
Case number(if known)			_	Check if this is an amended filing
Official Form 106E/F				
Schedule E/F: Creditors Who Hav	e Unsecure	ed Claims		12/15
Be as complete and accurate as possible. Use Part 1 for a complete and accurate as possible. Use Part 1 for a contract or unexpired leases that could rescribed by Executory Contracts and Unexpired Leases Schedule D: Creditors Who Have Claims Secured by Propert. Attach the Continuation Page to this page. If you have made and case number (if known). Part 1: List All of Your PRIORITY Unsecured C	result in a claim. Als (Official Form 106G perty. If more space we no information to	so list executory contracts on Schedule A/B: Pr 6). Do not include any creditors with partially se e is needed, copy the Part you need, fill it out, n	operty (Office cured claim umber the e	cial Form 106A/B) and on s that are listed in ntries in the boxes on the
Do any creditors have priority unsecured claims aga				
	airist you r			
■ No. Go to Part 2.				
☐ Yes.				
Part 2: List All of Your NONPRIORITY Unsecur	red Claims			
Do any creditors have nonpriority unsecured claims	s against you?			
☐ No. You have nothing to report in this part. Submit th	his form to the court v	with your other schedules.		
Yes.		jour suis, consciuos		
4. List all of your nonpriority unsecured claims in the a unsecured claim, list the creditor separately for each cla than one creditor holds a particular claim, list the other of Part 2.	aim. For each claim lis	sted, identify what type of claim it is. Do not list clai	ms already ir	ncluded in Part 1. If more
				Total claim
4.1 1st Heritage	Last 4 digits of	account number		\$6,000.00
Nonpriority Creditor's Name 101 N Main St Ste 600	When was the d	debt incurred?		
Greenville, SC 29601 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date y	rou file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another		NORITY unsecured claim:		
<u> </u>	Student loans			
☐ Check if this claim is for a community debt Is the claim subject to offset?		- rising out of a separation agreement or divorce tha	at you did not	
■ No		sion or profit-sharing plans, and other similar debts	;	
☐ Yes	Other. Specif			

Debto	Sonya Lynette Moye-Daniels	Case number (if known)	
4.2	ADT	Last 4 digits of account number	\$1,917.78
	Nonpriority Creditor's Name PO Box 371490	When was the debt incurred?	
	Pittsburgh, PA 15250 Number Street City State Zip Code	As of the date year file the plains in Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	_	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify	
4.3	Bank Plus	Last 4 digits of account number	\$420.98
	Nonpriority Creditor's Name 1068 Highland Colony P Ridgeland, MS 39157	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Bitty Advance	Last 4 digits of account number	\$7,000.00
	Nonpriority Creditor's Name		
	1855 Griffin Rd	When was the debt incurred?	
	Dania, FL 33004 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Debto	Sonya Lynette Moye-Daniels		Case number (if known)	
4.5	Capital One Auto Nonpriority Creditor's Name	Last 4 digits of account number	1001	\$16,040.00
	PO Box 260848 Plano, TX 75026-0848	When was the debt incurred?	Opened 10/22 Last Active 12/09/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Repossess		
4.6	Ccb-integra Nonpriority Creditor's Name	Last 4 digits of account number	9296	\$2,900.00
	120 S Lasalle St Chicago, IL 60603	When was the debt incurred?	Opened 12/06/24 Last Active 2/27/25	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.7	Century First Nonpriority Creditor's Name	Last 4 digits of account number	2024	\$3,667.00
	3318 Hardy Street Hattiesburg, MS 39401	When was the debt incurred?	Opened 7/19/24 Last Active 02/25	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	□ Yes	Other Specify Unsecured		

Debto	Sonya Lynette Moye-Daniels		Case number (if known)	
4.8	Consumer Portfolio Nonpriority Creditor's Name	Last 4 digits of account number	0926	\$6,380.00
	Attn: Bankruptcy Po Box 57071 Irvine, CA 92619	When was the debt incurred?	Opened 03/19 Last Active 10/11/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	Yes	Other Specify Automobile	= :	
4.9	Elan Financial Service Nonpriority Creditor's Name	Last 4 digits of account number		\$3,507.00
	PO Box 108 Saint Louis, MO 63166 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify		
4.1 0	Navy Federal CU Nonpriority Creditor's Name	Last 4 digits of account number	8131	\$476.00
	Attn: Bankruptcy Po Box 3302 Merrifield, VA 22119	When was the debt incurred?	Opened 07/24 Last Active 12/30/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	d claim:	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other, Specify Credit Card		

Debtor	Sonya Lynette Moye-Daniels		Case number (if knov	vn)	
4.1	NetCredit	Last 4 digits of account number	1929		\$3,220.00
	Nonpriority Creditor's Name	_	0 140/04		
	175 W Jackson Blvd Chicago, IL 60604	When was the debt incurred?	Opened 12/24 3/01/25	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	,	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or di	vorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other sim	ilar debts	
	Yes	Other. Specify Check Cred	lit Or Line Of Cre	edit	
4.1	Our Kids Christian	Last 4 digits of account number			\$540.00
	Nonpriority Creditor's Name 40 Holiday Rambler Ln	When was the debt incurred?			
	Byram, MS 39292 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	,	
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or di	vorce that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other sim	ilar debts	
	Yes	Other. Specify			
4.1	Progressive Insurance	Last 4 digits of account number			\$2,678.86
	Nonpriority Creditor's Name 6300 Wilson Mills Rd	When was the debt incurred?			
	Cleveland, OH 44143 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	,	
	Who incurred the debt? Check one.	, o auto , ou, o	or orlook all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	ration agreement or di	vorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a nlans, and other sim	ilar dehts	
	■ No □ Yes	_	9 Piano, and other 51111	iidi dobio	
	⊔ res	Other. Specify			

\$315.78
did not
\$1,655.37
did not
\$457.00
ive
did not
iiu iiut

Debtor	1 Sonya Ly	nette Moye-Daniels		Case nu	ımber (if kno	own)	
4.1	Synchrony		Last 4 digits of account number	0612			\$403.00
	Nonpriority Cred			0	40/00	Loot Anthro	
	Attn: Bankr Pob 965064		When was the debt incurred?	Open 11/24		Last Active	
	Orlando, FL		When was the dest mounted.	11/27	•		=
		City State Zip Code	As of the date you file, the claim i	s: Check	all that app	ly	
	Who incurred	the debt? Check one.					
	Debtor 1 on	ly	☐ Contingent				
	Debtor 2 on	lv	☐ Unliquidated				
	Debtor 1 and	•	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
			☐ Student loans				
	☐ Check if thi debt	is claim is for a community	_				
		bject to offset?	☐ Obligations arising out of a sepa report as priority claims	iration agi	reement or o	divorce that you did not	
	■ No	•	☐ Debts to pension or profit-sharin	a plans a	and other sir	milar debts	
	□ Yes		■ Other. Specify Charge Acc			a. 302.0	
							_
4.1 8	Vivian Port		Last 4 digits of account number				\$4,800.00
	Nonpriority Cree 3504 Posey	^r Rd	When was the debt incurred?				_
		MS 39664 City State Zip Code the debt? Check one.	As of the date you file, the claim i	is: Check	all that app	ly	
	Debtor 1 on	ly	☐ Contingent				
	Debtor 2 on	ly	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
		is claim is for a community	☐ Student loans				
	debt	bject to offset?	☐ Obligations arising out of a separeport as priority claims	ıration agı	reement or	divorce that you did not	
	■ No	is jour to on seri	Debts to pension or profit-sharin	g plans, a	and other si	milar debts	
	☐ Yes		Other. Specify				
							_
is tryii have r notifie	nis page only if y ng to collect fro more than one c ed for any debts	m you for a debt you owe to some creditor for any of the debts that ye in Parts 1 or 2, do not fill out or s	but your bankruptcy, for a debt that yeene else, list the original creditor in ou listed in Parts 1 or 2, list the additubility this page.	Parts 1	or 2, then li	ist the collection agend	y here. Similarly, if you
Part 4:		mounts for Each Type of Unse					
	the amounts of of unsecured cla		s. This information is for statistical re	eporting	purposes o	only. 28 U.S.C. §159. Ac	ld the amounts for each
						Total Claim	
Total	6a.	Domestic support obligations		6a.	\$	0.00	<u>) </u>
claims		Tanas and coasts of the		CI	Φ.	<u> </u>	
from Pa		Taxes and certain other debts y	-	6b.	\$	0.00	
	6c. 6d.	Claims for death or personal inj Other Add all other priority unsec	ury while you were intoxicated ured claims. Write that amount here.	6c. 6d.	, —— •	0.00	
	ou.	Other. Add all other priority unsec	ured daims. Write that amount here.	ou.	—	0.00	
	6e.	Total Priority. Add lines 6a through	gh 6d.	6e.	\$	0.00	<u>) </u>
						Total Claim	
Total	6f.	Student loans		6f.	\$	0.00	<u> </u>
claims from Pa	rrt 2 6g.	Obligations arising out of a sep	aration agreement or divorce that	6g.	\$	0.00)

Debtor 1 Sonya Lynette Moye-Daniels		Case number (if known)			
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	62,378.77
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	62,378.77

Fill in this inform					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Acima 9815 S Monroe St Sandy, UT 84070	Tires

25-01221-JAW Dkt 4 Filed 05/12/25 Entered 05/12/25 15:09:07 Page 26 of 49

Fill in thi	s information to identify your	case:		
Debtor 1	Sonya Lynette Mo			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case nun	ohor			
(if known)				☐ Check if this is an amended filing
Officia	al Form 106H			
Sche	dule H: Your Cod	ebtors		12/15
ill it out, a our nam		boxes on the left. Attack . Answer every question	h the Additional Page to n.	ion. If more space is needed, copy the Additional Page o this page. On the top of any Additional Pages, write as a codebtor.
	, ,	you are ming a joint case,	do not list eliner spease	as a codestor.
□ No ■ Ye				
■ Ye	es .			
	thin the last 8 years, have you na, California, Idaho, Louisiana,			y? (Community property states and territories include ington, and Wisconsin.)
■ No	o. Go to line 3.			
☐ Ye	es. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?	
in lin Form	e 2 again as a codebtor only i	f that person is a guaran	ntor or cosigner. Make s	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 6G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	SLM Logistics 54 Joe Benn Rd			Schedule D, line 2.4
	Beaumont, MS 39423			☐ Schedule E/F, line ☐ Schedule G
				Fergus Fcu
3.2	SLM Logistics			
3.2	54 Joe Benn Rd			Schedule D, line
	Beaumont, MS 39423			☐ Schedule E/F, line ☐ Schedule G
				Fergus Fcu

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

						•				
Fill	in this information to identify your c	ase:								
Deb	otor 1 Sonya Lyne	tte Moye-Daniels			_					
	otor 2 use, if filing)									
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF MISSISSIPPI		_					
(If kn	se number							ed filing ent showi	ing postpetition following date:	chapter
	fficial Form 106I					7	MM / DD/ Y	YYYY		
	chedule I: Your Inc									12/15
suppos spor attac		are married and not filing wi	ng jointly, and your s th you, do not includ	pouse le infor	is liv mati	ing with on abou	you, incl t your spo	ude info	rmation about nore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-	filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Emple			
	information about additional employers.		☐ Not employed				☐ Not e	mployed		
	Include part-time, seasonal, or	Occupation	Driver							
	self-employed work.	Employer's name	Self Employed							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	nere? 2 Years				_			
Par	Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to re	port for	any	line, writ	e \$0 in the	space. Ii	nclude your noi	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all	empl	oyers for	that perso	on on the	lines below. If	you need
						For De	btor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Sonya Lynette Moye-Daniels	-	Case	number (<i>if known</i>)			
	0	vy line 4 hore	4		Debtor 1	non-fi	ebtor 2 or iling spouse	
	Cop	y line 4 here	4.	\$_	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$_ \$	0.00	\$	N/A N/A	
	5g.	Union dues	5g.	\$ _	0.00	\$ 	N/A	
	5h.	Other deductions. Specify:	5h.+	· : —	0.00		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	0.00	\$	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ — \$	0.00	\$ 	N/A	
		* *	7.	Φ_	0.00	Φ	IN/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	3,557.38	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$_	1,870.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	* _	0.00	+ \$	N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5,427.38	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		5,427.38 + \$_		N/A = \$	5,427.38
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					Combin	
13.	Do	you expect an increase or decrease within the year after you file this form	?				monthly	income
		No.						
		Yes. Explain:						

Fill	in this information to identify your case:				
Deb	otor 1 Sonya Lynette Moye-Daniels		Check	if this is:	
			_	n amended filing	
	ouse, if filing)			supplement show 3 expenses as of t	ring postpetition chapter he following date:
Unit	ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSI	SSIPPI	<u></u>	MM / DD / YYYY	
Cas	se number				
(If k	nown)				
\bigcap	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are principles or space is needed, attach another sheet to this function (if known). Answer every question.				r supplying correct
Par					
1.	Is this a joint case?				
	No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househ	old of Debto	or 2	
_		Tor Coparate Floaders	ord or Dobic	<i></i>	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		3	Yes
		Daughter		16	□ No ■ Yes
		Daagiitoi			■ res □ No
					☐ Yes
					□ No
_					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your senses as of a date after the bankruptcy is filed. If this is a suppliphicable date.	ou are using this for lemental <i>Schedule</i> J	m as a sup J, check the	plement in a Cha box at the top of	pter 13 case to report the form and fill in the
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I: Yo</i> ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		500.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor	me equity loans	4d. \$		0.00

ebtor	1 _	Sonya Ly	nette Moye-Daniels	Case nun	Case number (if known)					
114	tilitie	e.								
6. U 1			heat, natural gas	6a.	. \$	218.00				
6k		-	ver, garbage collection	6b.	·	0.00				
60			, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	185.00				
60		Other. Spe	•	6d.	·	0.00				
			ekeeping supplies	od. 7.	·	831.00				
			hildren's education costs	8.	·	513.00				
_			ry, and dry cleaning	9.						
				9. 10.	·	150.00				
		•	roducts and services ntal expenses		· -	50.00				
			•	11.	. \$	0.00				
	-	-	Include gas, maintenance, bus or train fare.	12.	. \$	100.00				
			ar payments. clubs, recreation, newspapers, magazines, and bo			0.00				
			ributions and religious donations		\$	0.00				
		ance.	ibutions and rengious donations	14.	Ψ	0.00				
			surance deducted from your pay or included in lines 4	or 20						
		Life insura	, , ,	15a.	\$	0.00				
		Health insu		15b.	·	0.00				
		Vehicle ins		15c.	*	150.00				
			rance. Specify:	15d.	·	0.00				
					Ψ	0.00				
	pecify		clude taxes deducted from your pay or included in line	s 4 01 20. 16.	. \$	0.00				
			ase payments:		Ψ	0.00				
			ents for Vehicle 1	17a.	\$	0.00				
			ents for Vehicle 2	17b.	·	0.00				
		Other. Spe		176. 17c.	·	0.00				
		Other. Spe	-	17d.	·	0.00				
					Ψ	0.00				
			of alimony, maintenance, and support that you did our pay on line 5, <i>Schedule I, Your Income</i> (Officia		. \$	0.00				
			you make to support others who do not live with		\$	0.00				
	pecif		you make to support outsite time as not not man	, ou. 19.	·	0.00				
		,	erty expenses not included in lines 4 or 5 of this fo							
			on other property	20a.		0.00				
		Real estate		20b.	·	0.00				
			nomeowner's, or renter's insurance	20c.	·	0.00				
			ce, repair, and upkeep expenses	20d.	·	0.00				
			er's association or condominium dues	20e.	·	0.00				
			er s association of condominatin dues		+\$					
ı. O	tner:	: Specify:		21.	+5	0.00				
2. C	alcul	late your r	nonthly expenses							
22	2a. A	dd lines 4	through 21.		\$	2,697.00				
22	2b. C	copy line 22	2 (monthly expenses for Debtor 2), if any, from Official	Form 106J-2	\$					
			a and 22b. The result is your monthly expenses.		\$	2 607 00				
22	20. A	iuu iiiit ZZd	and 220. The result is your monthly expenses.		Ψ	2,697.00				
			nonthly net income.							
23	3a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	5,427.38				
			monthly expenses from line 22c above.	23b.	-\$	2,697.00				
		-								
23			our monthly expenses from your monthly income.			2 720 20				
	•	The result	is your monthly net income.	23c.	\$	2,730.38				
4 D	0 1/0	II evnect s	n increase or decrease in your expenses within th	e vear after you file this	s form?					
			u expect to finish paying for your car loan within the year or do			e or decrease because of a				
			terms of your mortgage?	. , o.poot jour mongago	r = 1 to into dot	2 2. 200.0000 booduoo of u				
	No.									
			Explain here:							
ᆫ] Yes	5.	<u>Ελριαίτι ΠΕΙ</u> Ε.							

Fill in th	nis informatio	n to identify your	case:					
Debtor 1	S	onya Lynette Mo	ye-Daniels					
		st Name	Middle Name	L	ast Name			
Debtor 2 (Spouse if,		st Name	Middle Name	L	ast Name		_	
United S	States Bankrup	tcy Court for the:	SOUTHERN DIST	RICT OF MISS	ISSIPPI			
Case nu	ımher							
(if known)								Check if this is an amended filing
O((; -; -	.l	0CD						
	al Form 10 laration		n Individu	ıal Deb	tor's Sch	hedule	es.	12/15
If two ma	arried people	are filing together	, both are equally r	esponsible for	supplying corre	ect information	on.	
Va m	u filo thio form	bamaaua f:	la hankuuntav aaha	dulaa ay aman	dad aabadulaa I	Makina a fak		
								ncealing property, or risonment for up to 20
		.C. §§ 152, 1341, 1					,,	
	Sian Bala							
	Sign Belo)W						
Did	l you pay or a	gree to pay some	one who is NOT an	attorney to he	lp you fill out ba	nkruptcy for	rms?	
	No							
П	Yes. Name	of person				Atta	ch <i>Bankruntcy</i> Pe	tition Preparer's Notice,
	roo. Hamo							ature (Official Form 119)
	ler penalty of they are true		that I have read the	summary and	schedules filed	with this de	claration and	
tilat	ancy are are	una correct.						
X		ynette Moye-Da) - l- (0		
	Sonya Lyne Signature of D	ette Moye-Danie Debtor 1	S		Signature of D	Jebtor 2		
	Data May 6	12 2025			Data			

Fill	in this inform	nation to identify you	r case:						
	otor 1	Sonya Lynette M							
	3.01	First Name	Middle Name	Last Name					
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name					
` '		nkruptcy Court for the:	SOUTHERN DISTRICT O						
	ica Giaics Bai	initiapitely Court for the.	- COOTTENT DIOTNOT C	NICOICOII I I					
1	se number nown)				_	Check if this is an amended filing			
Of	ficial Fo	rm 107							
		-	Affairs for Individ	duals Filing for B	ankruptcy	04/25			
info	rmation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write yo				
Par	t 1: Give D	Petails About Your Ma	arital Status and Where You	Lived Before					
1.	What is you	r current marital statu	ıs?						
	□ Married■ Not mar	ried							
2.	During the last 3 years, have you lived anywhere other than where you live now?								
	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there			
3. state					ity property state or territor ico, Texas, Washington and V				
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).					
Par	t 2 Explai	n the Sources of You	r Income						
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?			
	□ No ■ Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$21,280.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

De	ebtor 1 Sc	nya Lyne	tte Moye-D	aniels	Cas	Case number (if known)					
				Debtor 1		Debtor 2					
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)			
	For last calendar year: (January 1 to December 31, 2024)		☐ Wages, commissions, bonuses, tips	\$20,356.00	☐ Wages, combonuses, tips	ımissions,					
				Operating a business		☐ Operating a	business				
		dar year be December		☐ Wages, commissions, bonuses, tips	\$5,985.00	☐ Wages, combonuses, tips	ımissions,				
				Operating a business		☐ Operating a	business				
	List each	•	the gross inc	Debtor 1 Sources of income Describe below.	tely. Do not include income t Gross income from each source		ne 4.	Gross income (before deductions			
Ea	er the colon	dar voor bo	fore that	IDA Di e il ei	(before deductions and exclusions)			and exclusions)			
		dar year be December		IRA Distribution	\$43,699.00						
Pa	rt 3: Lis	t Certain Pa	ıyments You	ı Made Before You Filed for	Bankruptcy						
6.		r Dehtor 1's	or Debtor 3	2's debts primarily consume	r dehts?						
٠.	□ No.	Neither D	ebtor 1 nor	Debtor 2 has primarily consular personal, family, or household	ı <mark>mer debts.</mark> Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an			
		-	90 days bef	ore you filed for bankruptcy, di	d you pay any creditor a tota	al of \$8,575* or mo	re?				
		□ No.	Go to line								
		☐ Yes	paid that c	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the on 4/01/28 and every 3 years	nts for domestic support obliquis bankruptcy case.	gations, such as ch	nild support a	nd alimony. Also, do			
	Yes.			or both have primarily consu		al of \$600 or more?	?				
		□ _{No.}	Go to line	7.							
		■ Yes	include pa	each creditor to whom you pai yments for domestic support o r this bankruptcy case.	·		, ,				
	Creditor	's Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for			
	Only re	gular insta	allment pay	yments.	\$0.00	\$0.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplie	Card			

Del	btor 1 Sonya Lynette Moye-Daniels		Cas	se number (if known)		
7.	Within 1 year before you filed for bankru <i>Insiders</i> include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony.	partners; relatives of any ger in control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for
	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankru insider? Include payments on debts guaranteed or company No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe	Include cred	itor's name
Par	rt 4: Identify Legal Actions, Repossess	ions, and Foreclosures				
9.	Within 1 year before you filed for bankru List all such matters, including personal injumodifications, and contract disputes.					
	■ No					
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of th	e case
	Case number		,			
10.	Within 1 year before you filed for bankru Check all that apply and fill in the details be		erty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene	d			property
	Capital One Auto	2019 Ram ProMaste	• •			\$5,300.00
	PO Box 260848 Plano, TX 75026-0848	■ Property was reposse □ Property was foreclos □ Property was garnish	sed.			
		☐ Property was attache				
11.	Within 90 days before you filed for banks accounts or refuse to make a payment b No Yes. Fill in the details.		luding a bank or fil	nancial institution	ı, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date	action was	Amount
				taken		
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, or —		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a
	■ No □ Yes					

Del	Sonya Lynette Moye-Daniels	Case number	(if known)							
Pai	rt 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	than \$600 per person?	,						
	Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value						
	per person	bescribe the girls	the gifts	Value						
	Person to Whom You Gave the Gift and Address:									
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No									
	☐ Yes. Fill in the details for each gift or contr	ibution.								
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value						
Pai	rt 6: List Certain Losses									
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?									
	■ No									
	Yes. Fill in the details.									
		scribe any insurance coverage for the loss	Date of your	Value of property						
		lude the amount that insurance has paid. List pending urance claims on line 33 of <i>Schedule A/B: Property</i> .	loss	lost						
Pai	tt 7: List Certain Payments or Transfers									
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.									
	□ No									
	Yes. Fill in the details.									
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was	Amount of						
	Email or website address Person Who Made the Payment, if Not You	uansieneu	made	payment						
	The Rollins Law Firm, PLLC P.O. Box 13767 Jackson, MS 39236 trollins@therollinsfirm.com	Filing fee, attorney fee, credit report and credit counseling	4/7/2025	\$650.00						
17.		y, did you or anyone else acting on your behalf pay	or transfer any proper	ty to anyone who						
	promised to help you deal with your creditor Do not include any payment or transfer that you									
	■ No									
	☐ Yes. Fill in the details.									
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was	Amount of payment						

Deb	Debtor 1 Sonya Lynette Moye-Daniels			Case number (if known)	
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was				
	Address Person's relationship to you	property transferred		Describe any property or payments received or debts paid in exchange	made
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was				
	Nume of trust	Dood iphon and value of the prop		ty transferred	made
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and Stora	age Units	
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Bank Plus 1068 Highland Colony P Ridgeland, MS 39157	XXXX-	Checking Savings Money Market Brokerage Other_	12/2024	\$-420.9 8
	Renasant Bank 411 Hwy 80 E Clinton, MS 39056	xxxx-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	01/2025	\$-315.78
	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?				
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had accomplete Address (Number, State and ZIP Code) State and ZIP Code)			escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?				
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?

Del	ebtor 1 Sonya Lynette Moye-Daniels		Case number (if known)	
Pai	art 9: Identify Property You Hold or Control f	or Someone Else		
23.	Do you hold or control any property that son for someone.	neone else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Valu
Pai	art 10: Give Details About Environmental Info	rmation		
For	r the purpose of Part 10, the following definitio	ns apply:		
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surface water, groun	0 1 ,	
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	-	law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an envir		s waste, hazardous substance, toxic	substance,
Rep	port all notices, releases, and proceedings tha	t you know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	ny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adm	inistrative proceeding under any env	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	art 11: Give Details About Your Business or C	connections to Any Business		
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have ar	ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity	either full-time or part-time	

Official Form 107

■ A member of a limited liability company (LLC) or limited liability partnership (LLP)

☐ An owner of at least 5% of the voting or equity securities of a corporation

☐ An officer, director, or managing executive of a corporation

☐ A partner in a partnership

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Debtor 1 Sonya Lynette Moye-Daniels	(Case number (if known)		
	_			
☐ No. None of the above applies. Go to	o Part 12.			
Yes. Check all that apply above and f	ill in the details below for each business.			
Business Name	Describe the nature of the business	Employer Identification number		
Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.		
,	name of accountain or accountable.	Dates business existed		
SLM Logistics	transportation	EIN: 88-4172677		
54 Joe Benn Rd		From-To 10/2022-present		
Beaumont, MS 39423		From-To 10/2022-present		
 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. 				
Name	Date Issued			
Address (Number, Street, City, State and ZIP Code)	Date Issueu			
Part 12: Sign Below				
	a false statement, concealing property, or	I declare under penalty of perjury that the answers robtaining money or property by fraud in connection years, or both.		
Sonya Lynette Moye-Daniels	Signature of Debtor 2			
Signature of Debtor 1				
Date May 12, 2025	Date			
Did you attach additional pages to <i>Your Statem</i> ■ No □ Yes	nent of Financial Affairs for Individuals Fil	ling for Bankruptcy (Official Form 107)?		
Did you pay or agree to pay someone who is n ■ No	ot an attorney to help you fill out bankrup	tcy forms?		
Yes. Name of Person Attach the Bank	ruptcy Petition Preparer's Notice, Declaration	n, and Signature (Official Form 119).		

Fill in this information to identify your case:			
Debtor 1	Sonya Lynette Moye	-Daniels	
Debtor 2 (Spouse, if filing)			
United States B	Sankruptcy Court for the:	Southern District of Mississippi	
Case number (if known)			

According to the calculations required by this Statement: 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). 3. The commitment period is 3 years. 4. The commitment period is 5 years.	Check	Check as directed in lines 17 and 21:					
11 U.S.C. § 1325(b)(3). 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). 3. The commitment period is 3 years.		, , ,					
U.S.C. § 1325(b)(3). 3. The commitment period is 3 years.	•						
☐ 4. The commitment period is 5 years.		3. The commitment period is 3 years.					
		4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

		•							
Part	1: Calculate Your Average Monthly Income								
1.	What is your marital and filing status? Check one	only.							
	■ Not married. Fill out Column A, lines 2-11.								
	☐ Married. Fill out both Columns A and B, lines 2-11	1.							
10 th	Il in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6 e 6 months, add the income for all 6 months and divide the to ouses own the same rental property, put the income from tha	-month per tal by 6. Fil	riod would I in the re	be Mai sult. Do	rch 1 throu not includ	gh August 31 e any income	. If the amo	ount of your monthly incom ore than once. For exampl	e varied during e, if both
						Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before al payroll deductions).					\$	0.00	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	de payme	nts from	a spou		\$	0.00	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child suppo from an unmarried partner, members of your househo and roommates. Do not include payments from a spo you listed on line 3.	o rt. Include old, your o	e regular depende	· contril nts, pa	butions rents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1						
	Gross receipts (before all deductions) \$	i		9.63					
	Ordinary and necessary operating expenses -\$	i	3,79	2.25					
	Net monthly income from a business, profession, or farm \$	i	3,55	7.38	Copy here -> S	3,	557.38	\$	
6.	Net income from rental and other real property	Debtor							
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	-\$ _	0.00						
	Net monthly income from rental or other real property	\$	0.00	Сору	here ->	\$	0.00	\$	

Case number (if known)

			Column A Debtor 1		Column B Debtor 2 o	or	
Interest,	dividends, and royalties		\$	0.00	\$		-
Unemplo	Unemployment compensation			0.00	\$		
the Socia	nter the amount if you contend that the amount received was a benefit u						
For yo	u\$0.00	-					
	ur spouse \$	-					
benefit ur not includ United St disability, pay paid does not	or retirement income. Do not include any amount received that was a noter the Social Security Act. Also, except as stated in the next sentence de any compensation, pension, pay, annuity, or allowance paid by the lates Government in connection with a disability, combat-related injury or death of a member of the uniformed services. If you received any resunder chapter 61 of title 10, then include that pay only to the extent that exceed the amount of retired pay to which you would otherwise be entitunder any provision of title 10 other than chapter 61 of that title.	e, do or tired : it	\$	0.00	\$		
. Income f Do not in received domestic United St disability,	rom all other sources not listed above. Specify the source and amounted any benefits received under the Social Security Act; payments as a victim of a war crime, a crime against humanity, or international or terrorism; or compensation, pension, pay, annuity, or allowance paid by ates Government in connection with a disability, combat-related injury or death of a member of the uniformed services. If necessary, list other on a separate page and put the total below.	y the					
			\$	0.00	\$		
_		-	\$	0.00	\$		•
-	Total amounts from separate pages, if any.	+	\$	0.00	\$		•
t 2: De	etermine How to Measure Your Deductions from Income						otal average onthly income
	ur total average monthly income from line 11.					\$	3,557.38
You	are not married. Fill in 0 below.						
	are married and your spouse is filing with you. Fill in 0 below.						
☐ You Fill i	are married and your spouse is not filing with you. n the amount of the income listed in line 11, Column B, that was NOT reendents, such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as payment of the spouse's tax liability or the spouse's such as the spouse'						
You Fill i depo Belo adju	In the amount of the income listed in line 11, Column B, that was NOT resendents, such as payment of the spouse's tax liability or the spouse's staw, specify the basis for excluding this income and the amount of income stments on a separate page.	ıppoı	rt of someone	e other t	han you or you	ur depend	dents.
You Fill i depo Belo adju	In the amount of the income listed in line 11, Column B, that was NOT rependents, such as payment of the spouse's tax liability or the spouse's subway, specify the basis for excluding this income and the amount of income structures on a separate page. It is adjustment does not apply, enter 0 below.	ıppoı	rt of someone	e other t	han you or you	ur depend	dents.
☐ You Fill i depo Belo adju	In the amount of the income listed in line 11, Column B, that was NOT recendents, such as payment of the spouse's tax liability or the spouse's subw., specify the basis for excluding this income and the amount of income stments on a separate page. It is adjustment does not apply, enter 0 below.	ıppoı	rt of someone	e other t	han you or you	ur depend	dents.
You Fill i depo Belo adju	n the amount of the income listed in line 11, Column B, that was NOT recendents, such as payment of the spouse's tax liability or the spouse's subwell, specify the basis for excluding this income and the amount of income stments on a separate page. It is adjustment does not apply, enter 0 below.	e dev	rt of someone	e other t	han you or you	ur depend	dents.
☐ You Fill i depo Belo adju	n the amount of the income listed in line 11, Column B, that was NOT recendents, such as payment of the spouse's tax liability or the spouse's subwelling, specify the basis for excluding this income and the amount of income stments on a separate page. It is adjustment does not apply, enter 0 below.	ippoi e dev	rt of someone	e other t	han you or you	ur depend	dents.
☐ You Fill i depo Belo adju	n the amount of the income listed in line 11, Column B, that was NOT recendents, such as payment of the spouse's tax liability or the spouse's subwell, specify the basis for excluding this income and the amount of income stments on a separate page. It is adjustment does not apply, enter 0 below.	ippoi e dev	rt of someone	e other t	han you or you e. If necessary	ur depend	dents. itional
☐ You Fill i depo Belo adju If thi	n the amount of the income listed in line 11, Column B, that was NOT recendents, such as payment of the spouse's tax liability or the spouse's subwelling, specify the basis for excluding this income and the amount of income stments on a separate page. It is adjustment does not apply, enter 0 below.	ippoi e dev	rt of someone	e other t	han you or you e. If necessary	ur depend	dents. itional
Your cu	n the amount of the income listed in line 11, Column B, that was NOT recendents, such as payment of the spouse's tax liability or the spouse's subw., specify the basis for excluding this income and the amount of income stments on a separate page. Is adjustment does not apply, enter 0 below.	ippoi e dev	rt of someone	e other t	han you or you e. If necessary	ur depend y, list add	dents. itional

Sonya Lynette Moye-Daniels

Debtor 1

Debto	or 1	Sonya Lynette Moye-Daniels			Case number (if known)			
		М	ultiply line 15a by 12 (the number of months in	n a year).			x 12	
	15	o. Ti	ne result is your current monthly income for the	e year for this part of t	he form	\$_	42,688.56	
16	. Cal	culate	e the median family income that applies to	you. Follow these ste	ps:			
	16a	Fill i	n the state in which you live.	MS				
	16b	Fill i	n the number of people in your household.	3				
	16c.	To fi	n the median family income for your state and nd a list of applicable median income amounts	s, go online using the		\$_	78,140.00	
17	Hov		uctions for this form. This list may also be ava he lines compare?	ilable at the bankrupto	cy clerk's office.			
	17a		Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N					
	17b	. [Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation of Your Dispo				
Par	t 3:	Ca	Ilculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)				
18.	Cop	у уо	ur total average monthly income from line 1	11.		\$	3,557.38	
19.	cont	end t	ne marital adjustment if it applies. If you are hat calculating the commitment period under 1 income, copy the amount from line 13.					
	19a	If the	e marital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00	
	19b	Sub	tract line 19a from line 18.			\$_	3,557.38	
20.	Cal	culate	e your current monthly income for the year.	Follow these steps:				
	20a	Cop	y line 19b			\$_	3,557.38	
		Mult	iply by 12 (the number of months in a year).				x 12	
	20b	The	result is your current monthly income for the y	ear for this part of the	form	\$_	42,688.56	
	20c.	Cop	y the median family income for your state and	size of household from	m line 16c	\$_	78,140.00	
	21.	How	do the lines compare?					
		•	Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the cou	ırt, on the top of page 1 of this form, ch	eck box 3,	The commitment	
			Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwise ordere	ed by the court, on the top of page 1 of	this form, o	check box 4, The	
Par	By s	ignin	gn Below g here, under penalty of perjury I declare that to	the information on this	s statement and in any attachments is t	rue and co	rrect.	
			Lynette Moye-Daniels e of Debtor 1					
	•	Ma	y 12, 2025					
	If yo		1 / DD / YYYY cked 17a, do NOT fill out or file Form 122C-2.					
	-		cked 17b. fill out Form 122C-2 and file it with		of that form, copy your current monthly	income fro	m line 14 above	

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Case number (if known)

Debtor 1	Sonya Lynette Moye-Daniels	Case number (if known)
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Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2024 to 04/30/2025.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: **Self Employment** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	11/2024	\$7,123.10	\$3,091.79	\$4,031.31
5 Months Ago:	12/2024	\$7,419.20	\$4,010.54	\$3,408.66
4 Months Ago:	01/2025	\$8,125.14	\$4,468.44	\$3,656.70
3 Months Ago:	02/2025	\$6,914.21	\$3,647.60	\$3,266.61
2 Months Ago:	03/2025	\$6,241.15	\$3,866.92	\$2,374.23
Last Month:	04/2025	\$8,275.00	\$3,668.23	\$4,606.77
	Average per month:	\$7,349.63	\$3,792.25	
			Average Monthly NET Income:	\$3,557.38

Non-CMI - Social Security Act Income Source of Income: Dependent's SSI Constant income of \$1,870.00 per month.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi

In re		Sonya Lynette Moye-Daniels		Case No.		
		Debtor(s)		Chapter	13	
		DISCLOSURE OF COMPENSATION OF AT	TTORNEY	FOR DE	BTOR(S)	
	con	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the impensation paid to me within one year before the filing of the petition in bank rendered on behalf of the debtor(s) in contemplation of or in connection with the second contemplation of the debtor of	ruptcy, or agree	d to be paid	to me, for services rea	ndered or to
		FLAT FEE				
		For legal services, I have agreed to accept	\$			
		Prior to the filing of this statement I have received	\$			
		Balance Due	\$			
	✓	RETAINER				
	,	For legal services, I have agreed to accept and received a retainer of	\$		650.00	
		The undersigned shall bill against the retainer at an hourly rate of Debtor(s) have agreed to pay all Court approved fees and expenses exceeding amount of the retainer. Subject to yearly adjustment. Paralegals \$155.00 per hour Legal Assistants \$100.00 per hour	ng the		360.00	
2.	The	e source of the compensation paid to me was:				
		Debtor Other (specify):				
3.	The	e source of compensation to be paid to me is:				
		✓ Debtor				
4.	✓ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my				my law firm	
		I have agreed to share the above-disclosed compensation with a person or pecopy of the agreement, together with a list of the names of the people sharing				w firm. A
5.	5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case,				ase, including:	
	b. c.	Analysis of the debtor's financial situation, and rendering advice to the debtor Preparation and filing of any petition, schedules, statement of affairs and plan Representation of the debtor at the meeting of creditors and confirmation hear [Other provisions as needed] Negotiations with secured creditors to reduce to market value reaffirmation agreements and applications as needed; prepa 522(f)(2)(A) for avoidance of liens on household goods.	n which may be ring, and any ad ue; exemption	required; ljourned hear planning;	rings thereof;	ling of

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

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In re	Sonya Lynette Moye-Daniels	Case No.	
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet) CERTIFICATION					
May 12, 2025 Date	/s/ Thomas C. Rollins, Jr. Thomas C. Rollins, Jr. 103469 Signature of Attorney The Rollins Law Firm, PLLC P.O. Box 13767 Jackson, MS 39236 601-500-5533 Fax: 600-500-5296 trollins@therollinsfirm.com Name of law firm				